



WAIVER POSTAL VOTING REQUEST

Please complete the form following the guidelines below.

Section 1

Enter your address if it has not already been pre-printed (if pre-printed, please correct any mistakes).

Section 2

Enter your name if it has not already been pre-printed (if pre-printed, please correct any mistakes).

Section 3

You need to decide if you wish to have a postal vote:

- Until further notice;
- For elections that you already know will be held on a particular date;
- For all elections until a set date (you may be on holiday or otherwise unable to vote in person at a polling station until this date).

Section 4

This application, if completed correctly, entitles you to a postal vote for all elections you are entitled to vote in.

Section 5

If you will be away from home, then you can choose to have your ballot papers sent to an address other than the one shown in Section 1. If you choose for your ballot paper to be sent to a different address other than the address you are registered at you must give a reason for the alternative address. The postal vote must be completed by you, no one else can vote on your behalf. If you wish to appoint a proxy to vote on your behalf please see www.bristol.gov.uk/vote or contact us.

Section 6

Electors are required to provide their date of birth and a specimen of their signature.

As you have indicated that you would be unable to provide a consistent signature, I have included a version of the form which requires a statement from the person assisting you to complete the form, rather than a signature.

If you have any query with this correspondence, please do not hesitate to contact us.

Waiver application to vote by post

Only one form for each person. Please read the notes carefully before completing this form. If you need help filling in this form please phone contact us.

Please write in **BLACK INK** and **BLOCK CAPITALS**

1 Address where you are registered to vote

2 About you

First name(s) (in full)

Surname

Title (Mr, Mrs, Ms, Miss, Dr, Other)

Daytime or mobile telephone or email (Optional)

3 For how long do you want a postal vote?

Until further notice

For election(s) on

Day Month Year

For election(s) until

Day Month Year

4 Postal vote for which elections

This application, if completed correctly, entitles you to a postal vote for all elections you are entitled to vote in.

5 Address for postal ballot paper(s)

My address where I'm registered to vote in part 1 above

or

The following address

Reason for sending ballot paper(s) to an alternative address

6 Your declaration

As far as I know, the details on this form are true and accurate. You can be fined for making a false statement on this form.

Date of birth (e.g. 02 05 1965)

Day Month Year

Please state reason for Waiver requirement

Name of person assisting you

Address of person assisting you

Date of signing
